04-29-1999 90003 025 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #	P9600008182	1
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1. Corporation Name

FRAIDA FROMMELT CORPORATION

Principal Place of Business Mailing Address								••••		
W MILBOURNE FL 32904 W MILBOURNE FL		795 CONESTEE DR W MILBOURNE FL 32904				DO NOT WRITE IN THIS SPACE				
US	US	3. Date is corporated or Qualifed								
	lace of Business	2a. Mailing Address				4. FEI N			<u> </u>	p lied For
Suite, Ant.	# etc	26 Suite, Apt. #, etc.		_					\$8.75	
22	, oto.	27				5. Certifo	ate of Status Desired	Fee Recuired		
City & State		City & State				6. Election Campaign Financing \$5.00 May B				r/lay Be
23		28				Trust	und Contribution		Added 1	c Fees
Zip	Courtry	Zip	·	n .			orporation owes the cu	rrent year		17112
24	25		30				Person al Property Tax. Person al Property Tax. No. Name and Address of New Registered Agent			
	9. Name and Address of Curre	nt Registered Agent	81	I	ame	10. Name	and Address of New	Registere	u Agent	
FFIO	MMELT, EDWARD W						· 			
	SPRING LAKE DRIVE		82	S	treet Acdre	ess (P.O. Bo	x Number is Not Accep	itable)		
	BOURNE FL 32940-1961		83	1						
				<u> </u>					. 85 Zip (
			84	0	City			F	L 85 Zip (J Jule
office crr agent. I a	to the provisions of Sections 607.050 egistered agent, or bo.h, in the State m familiar with, and accept the obligation	of Florida. Such change was at	utnorizea dv	·tne	amed corpo corporatio	oration subm on's board of	is this statement for the chirectors. I hereby according	e purpose ept the app	of changing its ointment as re	g stered
SIGNATURE	Signature, typed or printed na ne of registered age	ent and title if applicable. (NOT E.	Registered Ager	nt sig	nature required	d when reinstating		DATE		
12.		NE DIRECTORS	13.			ADDITI	ONS/CHANGES TO O	FFICERS		
TITLE	VPT	☐ DELETE		1.1 TITLE 1.2 NAME					☐ Change	☐ Addition
NAME	FROMMELT, EDWARD W		1							
STREET ADDRESS					DRESS					
CITY-ST-ZIP	W MILBOURNE FL 32904		1.4 CITY-S 2.1 TITLE	ST-ZIF	<u> </u>				Change	Addition
TITLE	SP SPONNELT SPANNA	[] DELETE			-				on ange	
NAME	FROMMELT, FRAIDA 795 CONESETEE DR		8	2.2 NAME 2.3 STREET ADDRESS						
STREET ADDRESS	W MILBOURNE FL 32904									
CITY-ST-ZIP TITLE	17 MILDOURIAL I L 32904	DELETE	3.1 TITLE	2 4 CITY-ST-ZIP 3.1 TITLE					Change	☐ Addition
NAME			3.2 NAME							
STREET ADDRE 3S			33 STREET A		DRESS					
CITY-ST-ZIP			3.4. CITY-ST-ZIP		IP					
TITLE		☐ DELETE	4.1 TITLE				<u>- —</u>		Change	☐ Addition
NAME			4. 2 NAME							
STREET ADDRE 3S			4.3 STREE	4.3 STREET ADDRESS				-		
CITY-ST-ZIP			_	4.4 CITY-ST-ZIP						
TITLE		☐ DELETE	51 TITLE				•		Change	Addition
NAME			5.2 NAME	_						
STREET ADDRESS			53 STREE							
CITY-ST-ZIP			5.4 CITY-S 6.1 TITLE	ST-ZII					- Cl Charge	Addition
TITLE		(DELETE	שלוווו ב		1				Change	Audiabit

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as recuired by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRE 3S

□ DELETE